F	00	d	E	S	ablishment Inspection	R	ep	)0	rt							Score: <u>98.5</u>
Es	Establishment Name: <u>CLEMMONS VILLAGE I ASSISTED LIVING</u>								Establishment ID: 3034160011							
					ess: 6401 HOLDER RD										X Inspection Re-Inspection	
Ci								Date: 10 / 10 / 2017 Status Code: A								
								Time In: $10 : 10^{\circ}$ m Time Out: $11 : 50^{\circ}$ pm								
Zip: <u>27012</u> County: <u>34 Forsyth</u>									$\underbrace{\text{Ime In: } \underline{10} : \underline{10}_{\bigcirc pm}  \text{Ime Out: } \underline{11} : \underline{50}_{\bigcirc pm} \\ \text{Total Time: } 1 \text{ hr } 40 \text{ minutes} \\ \end{aligned}$							
Permittee: CLEMMONS VILLAGE LLC													ry #: IV			
Te	le	oho	one	e: _(	(336) 766-2990											
					System: 🛛 Municipal/Community [	0	n-S	Site	s Si	/ste	m				stablishment Type: Nursing Home	
					/: ⊠Municipal/Community □On-				-		No. of Risk Factor/Intervention Violations: $2$					
_			սր	ניקי				יייי	,			IN	0. (		Repeat Risk Factor/Intervention V	iolations:
	Foodborne Illness Risk Factors and Public Health Interventions Risk factors: Contributing factors that increase the chance of developing foodborne illness. Public Health Interventions: Control measures to prevent foodborne illness or injury.									Good Retail Practices Good Retail Practices: Preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.						
			N/A		Compliance Status	OUT CDI R VR				'R	IN	OUT	N/A	N/O	Compliance Status	OUT CDI R VR
		rvis			.2652						Safe					
1	X				PIC Present; Demonstration-Certification by accredited program and perform duties	2	0			] 2	8 🗆		X		Pasteurized eggs used where required	10.500
I		loye	e He	alth	.2652					2	9 🛛				Water and ice from approved source	21000
2	X				Management, employees knowledge; responsibilities & reporting	3 1.5	0				0 🗆	П	X		Variance obtained for specialized processing	
3	X				Proper use of reporting, restriction & exclusion	3 1.5	0			니는		1		atur	re Control .2653, .2654	
(	_	d Hy	gien	ic Pi	ractices .2652, .2653						1 🛛	1			Proper cooling methods used; adequate equipment for temperature control	
4	X				Proper eating, tasting, drinking, or tobacco use	21	0			ヿー	2 🛛	+			Plant food properly cooked for hot holding	
5	X				No discharge from eyes, nose or mouth	1 0.5	0			니는	3 🛛	-	_	-	Approved thawing methods used	
F	reve	entir	ng C	onta	mination by Hands .2652, .2653, .2655, .2656						_	-				
6	X				Hands clean & properly washed	42	0				4 🛛	_			Thermometers provided & accurate	
7	X				No bare hand contact with RTE foods or pre- approved alternate procedure properly followed	3 1.5	0				Food 5 🖂	-	ntific		n .2653 Food properly labeled: original container	
8	X				Handwashing sinks supplied & accessible	21	0			니느			n of	E E O	od Contamination .2652, .2653, .2654, .2656, .	
	\ppr	ove	d So	urce	.2653, .2655			_			6 🛛	1			Insects & rodents not present; no unauthorized	
9	X				Food obtained from approved source	21	0			니는	7 🛛	-			animals Contamination prevented during food	
10	X				Food received at proper temperature	21	0			_II⊢	_	-			preparation, storage & display	
11		×			Food in good condition, safe & unadulterated	2 🗙	0	X			8 🗙	-			Personal cleanliness	
12			X		Required records available: shellstock tags, parasite destruction	21	0			니는	9 🗆	+-			Wiping cloths: properly used & stored	
F	Prote	ectio	n fro	om C	Contamination .2653, .2654						0 🛛				Washing fruits & vegetables	
13	X				Food separated & protected	3 1.5	0					1	se of	f Ute	ensils .2653, .2654	
14		X			Food-contact surfaces: cleaned & sanitized	3 1.5	X	X			1 🛛	-			In-use utensils: properly stored	
15	X				Proper disposition of returned, previously served,	21	0			4	2 🛛				Utensils, equipment & linens: properly stored, dried & handled	10.50
		ntial	l Iy Ha	azar	reconditioned, & unsafe food dous Food TIme/Temperature .2653			_1	_1-	4	3 🛛				Single-use & single-service articles: properly stored & used	10.50
16	X				Proper cooking time & temperatures	3 1.5	0			] 4	4 🛛				Gloves used properly	
17	X				Proper reheating procedures for hot holding	3 1.5	0				Uten	sils	and	Equ	ipment .2653, .2654, .2663	
-	X				Proper cooling time & temperatures	3 1.5	0			74	5 🛛				Equipment, food & non-food contact surfaces approved, cleanable, properly designed,	
	X				Proper hot holding temperatures	+					6 🛛				constructed, & used Warewashing facilities: installed, maintained, &	
-	X				Proper cold holding temperatures						_	-			used; test strīps	
-								_			7 🔀 Phys		Faci	litio	Non-food contact surfaces clean	
-	X				Proper date marking & disposition Time as a public health control: procedures &		0				8 🛛	T		intie	s .2654, .2655, .2656 Hot & cold water available; adequate pressure	
22					records	21					9 🛛	-	H		Plumbing installed; proper backflow devices	
23	_		er Ad	dviso	Consumer advisory provided for raw or	1 0.5	Π				-	-				
				ntih	undercooked foods le Populations .2653						0 🛛	-			Sewage & waste water properly disposed	
	X				Pasteurized foods used; prohibited foods not	3 1.5				5	1	×			Toilet facilities: properly constructed, supplied & cleaned	1 0.5 🗶 🗆 🗆 🗆
		nica		-	offered .2653, .2657			-1		5	2	×			Garbage & refuse properly disposed; facilities maintained	10.5 🗙 🗆 🗆 🗆
25					Food additives: approved & properly used	1 0.5	0			] 5	3 🗙				Physical facilities installed, maintained & clean	
26	X				Toxic substances properly identified stored, & used	21	0					-			Meets ventilation & lighting requirements; designated areas used	
		orm	ance	e wit	h Approved Procedures .2653, .2654, .2658					╡┝				L		
27			X		Compliance with variance, specialized process, reduced oxygen packing criteria or HACCP plan	21	0								Total Deduction	ns: 1.5

this

North Carolina Department of Health & Human Services • Division of Public Health • Environmental Health Section • Food Protection Program DHHS is an equal opportunity employer.

## Comment Addendum to Food Establishment Inspection Report

Establishment Name: CLEMMONS VILLAGE I ASSISTED LIVING	Establishment ID: 3034160011				
Location Address: 6401 HOLDER RD   City: CLEMMONS   State: NC   County: 34 Forsyth   Zip: 27012   Wastewater System: Municipal/Community   On-Site System   Water Supply: Municipal/Community   On-Site System   Permittee: CLEMMONS VILLAGE LLC	☑ Inspection □ Re-Inspection Date: 10/10/2017   Comment Addendum Attached? □ Status Code: A   Category #: IV   Email 1: Email 2:				
Telephone: (336) 766-2990	Email 3:				
Temperature Observations					

ltem	Location	Temp	Item	Location	Temp	Item	Location	Temp
ServSafe	Randy Smith 1-19-21	00	Cabbage	Upright cooler	42			
Hot water	Handsink	110	Sausage	Upright cooler	40			
Hot water	3-compartment sink	126	Hamburger	Upright cooler	38			
Rinse cycle	Dish machine	165						
Quat ppm	3-compartment sink	300						
Beef	Final cook	190						
Potatoes	Final cook	160						
Carrots	Final cook	159						

## Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

3-202.15 Package Integrity - PF - 4 cans were dented along the seams in dry storage. Food packages shall be in good condition and protect the integrity of the contents. CDI - Dented cans relocated to be returned to the supplier.

- 14 4-601.11 (A) Equipment, Food-Contact Surfaces, Nonfood-Contact Surfaces, and Utensils P 0 pts One spatula, the commercial food processor, 1 pan, and 3 plates were soiled in clean dish storage. Food-contact surfaces of equipment and utensils shall be clean to sight and touch. CDI - Soiled items sent to be rewashed.
- 39 3-304.14 Wiping Cloths, Use Limitation C Repeat: 2 wet wiping cloths were stored outside of sanitizer solution during the inspection. Wet wiping cloths shall be stored in a sanitizer solution between uses. CDI Cloths discarded.

Lock Text							
Person in Charge (Print & Sign):	<i>First</i> Randy	Smith	Last	Kuch mo			
Regulatory Authority (Print & Sign)	<i>First</i> Grayson :	Hodge	Last	Jun Hodge REHSI			
REHS ID: 2554 - Hodge, Grayson Verification Required Date: / /							
REHS Contact Phone Number	: ( <u>336</u> ) <u>703</u> -	3383					
North Carolina Department		● Division of Pu HHS is an equal o _ Food Establishm	pportunity emp				

Spell

## **Comment Addendum to Food Establishment Inspection Report**

Establishment Name: CLEMMONS VILLAGE | ASSISTED LIVING

Establishment ID: 3034160011

	Observations and Corrective Actions
	Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.
51	6-501 18 Cleaning of Plumbing Eixtures - C - 0 pts - Cleaning is needed around the handsink on the half wall and around drain

51 6-501.18 Cleaning of Plumbing Fixtures - C - 0 pts - Cleaning is needed around the handsink on the half wall and around drain pipes on the dish machine. Plumbing fixtures shall be maintained clean.

52 5-501.11 Outdoor Storage Surface - C - 0 pts - The grease receptacle is stored halfway off the concrete above grass. Relocate the grease receptacle back onto the concrete pad.





Spell

Establishment Name: CLEMMONS VILLAGE I ASSISTED LIVING

Establishment ID: 3034160011

Observations and Corrective Actions Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.



Spell

Establishment Name: CLEMMONS VILLAGE I ASSISTED LIVING

Observations and Corrective Actions Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.



Establishment Name: CLEMMONS VILLAGE I ASSISTED LIVING

Establishment ID: 3034160011

Violations cited in this report must be corrected within the time frames below, or as stated in sections 8-405.11 of the food code.

